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(FILE 'HOME' ENTERED AT 11:32:40 ON 07 MAR 2004)

FILE 'STNGUIDE' ENTERED AT 11:32:43 ON 07 MAR 2004

FILE 'MEDLINE' ENTERED AT 11:33:13 ON 07 MAR 2004

L1	14489 S PAPILOMAVIRUS
L2	2967 S "E7"
L3	142040 S POOR
L4	16 S L1 AND L2 AND L3
L5	36 S L1 AND L2 AND POORLY
L6	7 S ANTIBOD? AND L5 E SHI W/AU
L7	221 S E3
L8	2 S PAPILOMAVIRUS AND L7 E SMAHEL M/AU
L9	24 S E3
L10	16 S PAPILOMAVIRUS AND L9

=> d 16 1-7 ti

- L6 ANSWER 1 OF 7 MEDLINE on STN
TI Provision of antigen and CD137 signaling breaks immunological ignorance, promoting regression of **poorly** immunogenic tumors.
- L6 ANSWER 2 OF 7 MEDLINE on STN
TI T-helper epitopes identified within the E6 transforming protein of cervical cancer-associated human **papillomavirus** type 16.
- L6 ANSWER 3 OF 7 MEDLINE on STN
TI Activation of local cell-mediated immunity in interferon-responsive patients with human **papillomavirus**-associated lesions.
- L6 ANSWER 4 OF 7 MEDLINE on STN
TI Characterization of human **papillomavirus** type 16 activity in separate biopsies from a carcinoma of the cervix uteri.
- L6 ANSWER 5 OF 7 MEDLINE on STN
TI Expression of E6/**E7** or SV40 large T antigen-coding oncogenes in human corneal endothelial cells indicates regulated high-proliferative capacity.
- L6 ANSWER 6 OF 7 MEDLINE on STN
TI Properties of two epithelial cell lines derived from HPV-associated cervical and vulvar lesions.
- L6 ANSWER 7 OF 7 MEDLINE on STN
TI Occurrence of IgA and IgG **antibodies** to select peptides representing human **papillomavirus** type 16 among cervical cancer cases and controls.

L4 ANSWER 11 OF 16 MEDLINE on STN
 AN 2001327825 MEDLINE
 DN PubMed ID: 11394975
 TI Vaccine candidates in STD.
 AU Fletcher M A
 CS Medical Affairs Department, Aventis Pasteur, 2 Avenue Pont Pasteur,
 F-69367 Lyon Cedex 07, France.
 SO International journal of STD & AIDS, (2001 Jul) 12 (7) 419-22. Ref: 12
 Journal code: 9007917. ISSN: 0956-4624.
 CY England: United Kingdom
 DT Journal; Article; (JOURNAL ARTICLE)
 General Review; (REVIEW)
 (REVIEW, TUTORIAL)
 LA English
 FS Priority Journals; AIDS
 EM 200108
 ED Entered STN: 20010903
 Last Updated on STN: 20010903
 Entered Medline: 20010830

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L4 ANSWER 11 OF 16 MEDLINE on STN
 AB Sexually transmitted diseases (STDs) are caused by organisms that infect the mucosal surfaces of the genitourinary tract. In spite of its public health importance, particular scientific problems have delayed the development of an STD vaccine, such as incomplete attenuation (human herpes simplex virus type 2), accentuated immunopathology (Chlamydia trachomatis), **poor** immunogenicity (Treponema pallidum), and broad antigenic heterogeneity (Neisseria gonorrhoeae). Nevertheless, efforts continue with the use of protein antigens: for example, the haemolysin toxoid of Haemophilus ducreyi; the major outer membrane protein(s) of N. gonorrhoeae and C. trachomatis; the glycoprotein D of human herpes simplex virus type 2; and the proteins E6 and **E7** of the human **papillomavirus**. It could be predicted that eventual STD vaccines (administered either for prophylaxis or for therapy) will use approaches that will include (1) live-attenuated viruses, (2) subunit proteins or inactivated whole organisms given with mucosal adjuvants or with cellular immune response adjuvants, or (3) DNA plasmids expressing the vaccine antigen.